

DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814



March 28, 1979

ALL-COUNTY LETTER NO. 79-17

TO: ALL COUNTY WELFARE DIRECTORS

SUBJECT: ALLOCATION AND PLAN FOR 24-HOUR SOCIAL SERVICE RESPONSE

REFERENCE:

As stated in an All-County Letter dated March 7, 1979, which announced the possibility of state funds being available to counties for 24-hour social service response to child abuse reports, we are enclosing the instructions for requesting these funds. Each county must submit a plan detailing their proposed 24-hour response system. The plans are to be submitted by April 30, 1979. Plans should address the fifteen "County Responsibilities" as guidelines since regulations are being planned that will require these responsibilities when promulgated (see section II.B. of Instructions). Staff within the Adult and Family Services Division, Family and Children's Services Branch, will review the plans to determine whether or not counties' plans meet the proposed requirements. If not, Branch staff will provide technical assistance in order to bring the plans into compliance with the proposed requirements.

A total of five million dollars in General Fund monies are earmarked in Governor Brown's fiscal 1979-80 budget for 24-hour social service response systems in the 58 counties. All counties will receive a base amount of \$2,325. This amount, added to the county match (\$775), equals the level of funding which has been calculated as the minimum amount required to implement this system in the small population counties. The remainder of the five million dollars has been divided on the basis of the number of children in each county aged 0-17. (See enclosed proposed county allocations.)

A separate line item entitled "Emergency Response" has been added to the new Social Services Worker Time Study, DFA 46 form, which will be promulgated statewide on July 1, 1979. Specific claiming instructions will be transmitted under separate cover.

The five million dollars has not yet been approved by the Legislature, so it is not guaranteed. If approved, it is our intent to fund 24-hour social service response systems as a permanent component of Child Protective Services

each subsequent year. If approved, the monies become available July 1, 1979, and it is our intent to implement 24-hour social service response systems at that time. Our goal is to qualify all counties for funding prior to July 1.

Family and Children's Services Branch staff are available to answer questions and/or provide assistance with plan development (including onsite, if necessary). Please contact Sylvia Kerr or Gary Matthies with questions/requests relating to plan development at 744 P Street, Room 940, Sacramento, CA 95814, (916) 322-6333.

Sincerely,

A handwritten signature in cursive script, reading "James H. Gomez".

JAMES H. GOMEZ
Deputy Director

Enc.

cc: CWDA

PROPOSED ALLOCATION

COUNTIES	Number of Children Age 0 - 17	Baseline Allocation	Non-Baseline Allocation (based on # of children)	Total State Allocation (columns 2 + 3)	
ALAMEDA	284,685	2,325	222,678	225,003	
ALPINE	218	2,325	146	2,471	
AMADOR	3,995	2,325	2,968	5,293	
BUTTE	31,563	2,325	24,667	26,992	
CALAVERAS	4,285	2,325	3,356	5,681	
COLUSA	3,807	2,325	2,968	5,293	
CONTRA COSTA	173,257	2,325	135,543	137,868	
DEL NORTE	4,814	2,325	3,746	6,071	
EL DORADO	19,771	2,325	15,471	17,796	
FRESNO	153,720	2,325	120,267	122,592	
GLENN	6,196	2,325	4,865	7,190	
HUMBOLDT	29,117	2,325	22,769	25,094	
IMPERIAL	32,935	2,325	25,785	28,110	
INYO	4,483	2,325	3,503	5,828	
KERN	115,800	2,325	90,589	92,914	
KINGS	25,323	2,325	19,801	22,126	
LAKE	7,214	2,325	5,644	7,969	
LASSEN	4,896	2,325	3,843	6,168	
LOS ANGELES	1,952,461	2,325	1,527,317	1,529,642	
MADERA	17,226	2,325	13,476	15,801	
MARIN	52,452	2,325	41,013	43,338	
MARIPOSA	2,205	2,325	1,703	4,028	
MENDOCINO	19,194	2,325	15,033	17,358	
MERCED	41,466	2,325	32,451	34,776	
MODOC	2,160	2,325	1,703	4,028	
MONO	1,818	2,325	1,411	3,736	
MONTEREY	80,530	2,325	63,004	65,329	
NAPA	24,451	2,325	19,120	21,445	
NEVADA	10,389	2,325	8,125	10,450	
ORANGE	532,775	2,325	416,797	419,122	
PLACER	30,374	2,325	23,742	26,067	
PLUMAS	4,031	2,325	3,162	5,487	
RIVERSIDE	171,863	2,325	134,424	136,749	
SACRAMENTO	200,704	2,325	156,998	159,323	
SAN BENITO	7,158	2,325	5,595	7,920	
SAN BERNARDINO	234,327	2,325	183,319	185,644	
SAN DIEGO	479,832	2,325	375,492	377,817	
SAN FRANCISCO	118,341	2,325	92,584	94,909	
SAN JOAQUIN	92,260	2,325	72,150	74,475	
SAN LUIS OBISPO	31,492	2,325	24,618	26,943	
SAN MATEO	141,363	2,325	110,585	112,910	
SANTA BARBARA	74,278	2,325	58,090	60,415	
SANTA CLARA	369,088	2,325	288,747	291,072	
SANTA CRUZ	46,153	2,325	36,099	38,424	
SHASTA	29,601	2,325	23,158	25,483	
SIERRA	774	2,325	632	2,957	
SISKIYOU	9,783	2,325	7,638	9,963	
SOLANO	63,721	2,325	49,868	52,193	
SONOMA	72,959	2,325	57,068	59,393	
STANISLAUS	78,845	2,325	61,690	64,015	
SUTTER	15,304	2,325	11,968	14,293	
TEHAMA	9,631	2,325	7,541	9,866	
TRINITY	3,206	2,325	2,530	4,855	
TULARE	77,204	2,325	60,377	62,702	
TUOLUMNE	8,252	2,325	6,471	8,796	
VENTURA	161,355	2,325	126,251	128,576	
YOLO	28,489	2,325	22,282	24,607	
YUBA	15,724	2,325	12,309	14,634	
GRAND TOTAL	6,219,318	134,850	4,865,150	5,000,000	

Instructions
For Request For Funds
For 24-Hour Social Service Response
To Child Abuse Reports/Self-Referrals

(County plans are to be completed in accordance with the contents of these instructions)

I. Introduction

Background, Current Problems, Existing Need

In response to demonstrated successes of various 24-hour social service child protection intervention projects, the following state regulation (Division 30-113) was added in 1969:

"Emergency protective service intervention shall be available 24 hours a day, seven days a week."

In 1976, a statewide survey to determine the level of services available for abused and neglected children resulted in the identification of several critical areas where county protective services programs fell short of meeting minimal state requirements. Number one on the list was 24-hour social service response, with very few of the counties totally meeting this requirement. In addition, the Assembly Human Resources Committee held public hearings in Los Angeles and San Francisco to gather information on the operation of protection programs; the testimony supported the survey findings. The need for 24-hour social services was again stressed repeatedly during the September 1978 public hearings on child abuse held in Fresno and Los Angeles, sponsored by Health and Welfare Agency Secretary, Mario Obledo, and conducted by the State Advisory Committee on Child Abuse and the Office of Child Abuse Prevention.

All data reviewed around the state relating to the times that children are taken into custody revealed that over one-half are taken between the hours of 5 p.m. and 8 a.m. and weekends. Therefore, these are the times when social service intervention is needed most. Yet, most after hours complaints/referrals are still handled by law enforcement agencies, whose after hours staff consist almost exclusively of patrol officers with no, or very little, specialized training in child abuse dynamics, family stress, and crisis intervention. Although the officers try to do their best under these circumstances, it is extremely unfortunate that social service intervention is not available because immediate skilled social service intervention in family crisis situations, coordinated with other follow-up community services, will result in significantly less trauma to the family and children involved, and will also result in more cost effective child protective systems.

II. Objectives and County Responsibilities

A. Objectives

The purpose of this allocation is to implement 24-hour social service response systems in all 58 California counties. 24-hour social service response includes provision of social service staff on call at all hours to take calls and to respond in person when appropriate according to guidelines provided later in these instructions.

Although provision of a statewide 24-hour social service response system will not be the "final" answer to the problems it addresses, it will provide the "hub" for the provision of comprehensive, coordinated, unduplicated community child protection response systems throughout the state. All other community child protection services in existence now and planned for the future (emergency caretakers, homemakers, follow-up treatment services, multi-disciplinary teams, emergency foster family homes, respite care, family shelters, child abuse councils, primary prevention services) will back-up this intake service.

B. County Responsibilities

The following list denotes proposed county requirements for implementation of 24-hour social service response to child abuse reports

1. Assurance that all 24-hour response staff will meet the education and experience standards required in Sections 30-113.4 and 30-113.4.41 of the State Operations Policies and Procedures Manual. This includes all contracted out professional personnel.
2. Provision of bilingual and/or bicultural staff in counties with a significant number of non-English speaking/minority persons;
3. Written agreements with all major related agencies in the community dealing with child abuse/neglect (including those from whom the department is purchasing services with these funds) in which the other agencies express intent to cooperate with 24-hour social service response systems. With regards to law enforcement, a description of cooperative efforts is required. Ideally, this would include written agreements with law enforcement that they will:
 - a. upon request, accompany social service staff on potentially dangerous responses and/or respond immediately when workers need them to remove children or for any other reason,

- b. request social service intervention/accompaniment on their child abuse cases when they deem it appropriate, and
 - c. refer to the 24-hour intake a copy of, or call in information about, all complaints/referrals taken by them that involve child abuse/neglect, whether or not social services are needed;
4. Provision of a county toll free number. Smaller, less densely populated counties may share a number, if desired (contact your local utility representative for the most cost-effective service for your county, or consult state staff for assistance).
5. Establishing the 24-hour number within a voluntary social service agency/unit; (Note: Voluntary is defined as an agency/unit with whom clients work voluntarily, i.e., CPS, community child abuse/stress hotline. Non-voluntary denotes units/agencies such as law enforcement, probation or dependent children sections.)
6. A public awareness campaign that advertises the new service to the community and that focuses on the attraction of self-referrals;
7. Qualified response staff who will be located in geographical proximity to the families reported/self-referred (this may require outstationing of staff and/or using on-call staff who live in different areas of large counties);
8. Persons answering initial calls shall be trained in crisis intervention, community resources, screening and referral. If an answering service is utilized, the answering staff must be trained to direct all calls immediately to the professional on call;
9. Availability of response staff 24 hours a day, seven days a week, who shall adhere to the following emergency response guidelines: (Note: Emergency response is defined as "an immediate in-person response to a crisis situation in behalf of children whose needs are such that the service cannot and should not be delayed.") Emergency response is to begin without any delay after it has been determined that an emergency exists.

GUIDELINES:

Referrals to law enforcement for emergency service shall be made when:

- a. a crime is being committed (e.g., complainant can hear and/or see child(ren) being beaten),
- b. there is a family dispute,
- c. referral involves unattended or abandoned children,

Referrals to a more appropriate crisis line (if available) shall be made when:

a. caller needs emergency telephone counseling and the problem does not involve the protection of children,

The CPS worker shall respond in person when:

a. hospital emergency room staff request interviewing of parent(s) and/or consultation with medical staff (limited to cases where the parent(s) are suspected of abusing or severely neglecting their child(ren) and a police hold will be requested if the diagnosis is made),

b. self-referrals where parent(s) feel they will harm their child or children,

c. the complainant has good reason to fear for the immediate safety of child(ren) and none of the conditions for referral to law enforcement (as outlined above) are present (e.g., the complainant fears the parent(s) will harm their child(ren) but can be counseled to avoid harming them),

d. law enforcement requests that CPS worker accompany them on a call,

- - All overtime taken shall be reviewed by the 24-hour response services supervisor for appropriateness;

10. Provision for continuity of services following the initial response by 24-hour staff. Time must be given for consultation with agencies/professionals to whom referrals are made and multi-discipline team meetings;

11. Provision for a person to be overall supervisor/coordinator of the 24-hour response system. The percentage of this person's time must be proportionate to the size of the system;

12. Provision for record keeping to include such things as calls taken, responses to the calls and referrals made for follow-up. These records must be recorded on forms to be provided by the state and made accessible to other 24-hour service staff and follow-up staff;

13. Assurance that when paraprofessional back-up staff are involved (such as emergency caretakers, homemakers, emergency foster homes), all new families will be seen in person by the professional response person before being referred to back-up personnel;

14. Utilization of the communities' child abuse coordinating councils or community children's service advisory committees in an advisory capacity to the 24-hour response system. If neither of these exist, assurance that one will be formed which will include representation from agencies and individuals directly involved with child abuse/neglect (investigation, treatment and/or prevention, education, citizen organizations and consumers). State staff will provide assistance in starting a council/committee.

15. In the event that a county already has a 24-hour social service response system operational that meets all or part of these requirements, the county may replace the monies formally expended on 24-hour social service response with emergency response monies and shall utilize the monies from the former source for related back-up services in the following order:

- a. 24-hour emergency caretakers
- b. homemakers
- c. respite care
- d. follow-up treatment services
- e. 24-hour emergency foster family homes
- f. multi-disciplinary teams
- g. primary prevention services.

In the event that the county allocation for 24-hour social services response is greater than the amount necessary to provide these services as required in these instructions, the county may utilize the remaining funds for the related back-up services as listed above, and in that order. If a county chooses not to utilize available monies for back-up services, it shall receive only the amount necessary to fulfill requirements of 24-hour social service response.

C. Scope of Proposed Systems

1. Desired Approach

It has repeatedly been demonstrated that decisions made by the first person on the scene (following a report of child abuse) determine the nature of services to follow.

Presently in California, about one-fourth of the children removed from their homes and placed in emergency facilities are returned home in less than two days; about 55 percent are returned in less than 14 days; and only about 12 percent are eventually placed out of the home. In addition to the emotional trauma involved, the unnecessary removal of children from the home sets into motion a chain of events that involves large expenditures of money (to pay for the professionals, foster homes, receiving homes). For example, a recent study in a large California county has indicated that about 20 percent of all child protection monies are expended for direct services to families (where the problems lie), while 80 percent is expended for out-of-home placements, court investigations and supervision of dependent children.

The desired approach, therefore, is to provide professional social services in the home beginning with the initial report, thereby decreasing the number of children

unnecessarily removed, and increasing the percentage of removed children who are placed permanently, and also increasing the percentage of time and money expended on direct help to the families involved. It is imperative that this ratio be altered for two basic reasons:

- a. experience with most out-of-home placements has proven that it does little, if anything, to decrease child abuse from generation to generation, and
- b. there is a limited amount of money for child protection services; therefore, these monies must be expended in the most cost effective manner possible.

III. Plan Format

The proposal shall include the following in the specified order:

A. Statement of Problem and Need

This statement must outline the critical issues in CPS in the county and explain how the planned services will meet the need. It shall not exceed one (1) page.

B. Plan

1. Estimated number of after hours CPS referrals.
2. Describe completely the system which will be utilized to provide immediate social service intervention, including how the county will meet all 15 responsibilities outlined in section II(B) of these instructions.
3. If applicable, list supportive services to be provided with other funding sources which previously funded 24-hour response and/or to be provided with these funds (see item II.B.15. of these instructions to determine if applicable to your county). List on exhibit D.
4. Fully describe the system which will ensure rapid follow-up by CPS staff.

C. Management/Administration

1. Present a proposed line-item budget (see Exhibit A). In addition, provide an itemized listing of all services to be purchased. Include breakdown of all (see Exhibit B) consultation services to be purchased. If emergency caretakers are utilized, who are employed by CWD, include bonding costs, which should be itemized under insurance expenses.

A separate breakdown of administrative overhead/expenses should also be attached.

2. Describe record system.
3. Provide breakdown of current 24-hour response system expenditures.(see Exhibit D)

D. Staffing

1. List personnel by classification, citing required qualifications and job descriptions and detailed personnel costs (see Exhibit C).
2. Describe contractual arrangements for professional consultation to staff, if applicable.

E. Evaluation

1. The plan shall specify the way in which provision of 24-hour services will be evaluated by the county on an ongoing basis.
2. State staff will also evaluate each county's provision of 24-hour services.
3. Available base line data shall be included in the plan.

F. State Assistance

1. State staff will monitor the project on an ongoing basis. Technical assistance and consultation services will be provided by appropriate staff persons, when necessary.

IV. Time Span For Submission of Plans

A. Submission of Plans

1. Plans should be submitted to:

Loren D. Suter, Chief
Family and Children's Services Branch
Department of Social Services
744 P Street, Mail Station 9-101
Sacramento, California 95814
2. All plans must be received by close of business, Friday, April 30, 1979. The body of the plan shall not exceed 12 typed pages. Each county shall submit six (6) copies of the plan.
3. As soon as each plan is approved, the county welfare departments will be notified and implementation of the plan will begin.

V. Guidelines for Preparing Line Item Budget: (specific claiming instructions will follow)

A. Casework Costs: Include those salaries and benefits for social worker time expended on emergency response during regular working hours. Emergency response includes travel time, initial assessment of on-site situations, immediate arrangement for emergency in-home services (such as emergency caretakers), immediate removal of children from the home, immediate placement in emergency out-of-home facilities and initial consultation with worker(s) to whom cases are assigned for ongoing services. Telephone time while taking initial reports/referrals cannot be claimed under emergency response in the time study.

B. Direct Costs: Includes overtime, standby pay, and contracted services.

C. Overhead: Other expenses (telephone, toll free numbers, answering service, "beepers," mileage) will be included in overhead except when contracted out, in which case they will be direct charged as part of the contractual agreement.

D. For those counties where emergency response monies are replacing monies formally expended in 24-hour services and new back-up services are added with the former funding, claiming procedures required by the funding source(s) involved must be followed for the new services.

SAMPLE FORMAT

COUNTY NAME _____

BUDGET

FOR THE PERIOD _____ TO _____

Funds

Budget Category	(1) State	(2) County	(3) In-Kind County	(4) Total Co- Contribution, (2) + (3)	Total (1) + (4)
1. <u>Time Study Claims</u>					
a) Social worker time during regular hours					
b) Overhead					
2. <u>Direct Charged</u>					
a) Stand-by pay					
b) Overtime pay					
c) Contracted services response (for 24-hr. response)					
d) Other (please list, if any)					
1.					
2.					
3.					
Back-up Services funded with emergency response monies					
a) within department					
b) contracted out					
TOTAL					

COUNTY _____

(List all budgeted consultants)

[illegible]

(List All Budgeted Staff)

[illegible]

SAMPLE FORMAT

COUNTY NAME _____

BUDGET

FOR THE PERIOD _____ TO _____

Funds

Budget Category	(1) Title XX	(2) Title IV-B	(3) In-Kind County	(4) Total Co Contribution, (2) + (3)	Total (1) + (4)
1. Breakdown of current 24-hr. response system expenditures					
a) within department					
b) contracted					
*Breakdown of back-up services to be provided with monies replaced by emergency response funds					
a) Emergency Caretakers					
1. within department					
2. contracted					
b) Emergency Homemakers					
1. within department					
2. contracted					
c) Respite Care					
1. within department					
2. contracted					
TOTAL					

*List others (i.e., follow-up treatment services, emergency foster homes, multi-descriptive team, primary prevention) on back, if any.